PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

10/584, 402

| - | | | | | | | | | FIU/ | | | |
|---|--|---|--|-----------------------------------|--------------------|----------------------------------|---------------------|---------------------|------------------------|----|---------------------|------------------------|
| CLAIMS AS FILED - PART I | | | | | | | | SMALL EN | TITY | OR | OTHER SMALL | |
| | LAMOITAM | STACE SEES | (Colu | ımn 1) | | (Column 2) | 1 | RATE | FEE | 7 | | |
| U.S. NATIONAL STAGE FEES | | | | | | | ł | | rec | - | RATE | FEE |
| BA | SIC FEE | | | | | GE ENT. = \$ 300 | | BASIC FEE | ļ | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | Satisfies PCT Article 33(1)- All other situations (4) = \$50/\$100 \$100/\$200 | | | | | EXAM. FEE | |] | EXAM. FEE | 200 |
| SEARCH FEE | | | U.S. is ISA = \$50/\$100 ALL other countries = \$ 200/\$400 | | | ther situations = \$250 / \$ 500 | | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | 18ef minus 100 = 84 | | | 1150=2 | | X \$ 125 = | | 1 | X \$ 250 = | 500 |
| 701 | AL CHARGEA | BLE CLAIMS | 33 minus 20 = . 13 | | | | | X \$ 25 = | | OR | X \$ 50 = | 650 |
| IND | EPENDENT CI | AIMS | / minus 3 = . | | | | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPEN | DENT CLAIM PR | ESENT | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 2050 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL E | ENTITY | OR | OTHER SMALL E | |
| AMENOMENT A | lekle/x | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total / | .33 | Minus | -3 | 3 | = / | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | • / | Minus | J (- | 3 | =/ | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +\$ 180 = | | OR | + \$ 360 = | |
| | | - | | | | | • | TOTAL ADDIT. FEE | | ÓR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colun | na 21 | (Column 3) | • | | - | | • | |
| ff 8 | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID I | EST BER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| 윘 | Total | • | Minus | •• | | 8 | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | • . | Minus . | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | ſ | +\$ 180 = | | OR | + \$ 360 = | |
| | | | 7 | TOTAL ADDIT. FÉE, | | OR | TOTAL ADDIT. FEE | | | | | |
| • | | | | | | | | | | | | |
| • 1 | f the entry in colu | mn 1 is less than the | entry in column | 1 2, write "0" in | column | 3. | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |